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APPLICANTS

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 ** CONTINUING DATA ***** *NONE LP*

 ** FOREIGN APPLICATIONS ***** *NONE LP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY SEYCHELLES	SHEETS DRAWING 5	TOTAL CLAIMS 18 41	INDEPENDENT CLAIMS 3 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Alliance	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		
Verified and Acknowledged				

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23483

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TITLE

INTUBATING LARYNGEAL MASK AIRWAY DEVICE WITH FIBER OPTIC ASSEMBLY

FILING FEE RECEIVED 1992	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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